


This convenient guide for HMO Louisiana, Inc. will help you locate key information quickly. The HMO Louisiana Network is offered statewide. Please refer HMO Louisiana members to HMO Louisiana Network providers so they receive the highest level of benefits. Additional information is available in the *HMO Louisiana, Inc. Provider Manual* and the *Blue Cross Professional Provider Office Manual*; both are online at www.BCBSLA.com/providers > Resources.

Sample HMO Louisiana Member ID Card

 HMO Louisiana		HMO/POS Network Fully Insured
Member Name		
Member ID		
Grp/Subgroup 12345XX6/000		[Advantage Plus Dental Network]
RxMbr ID 123456789	RxBIN 003858	RxPCN-A4
RxGrp BC PLAN 170	BSLA BS 670	
04100 01320 0118R		

SAMPLE

The main identifier for HMO Louisiana members is the HMO Louisiana logo in the top left corner of the member ID card.

Cards also indicate the product type as either an HMO Plan or POS Plan.

Point of Service (POS) allows members to choose each time they need care—at the point of service—whether to use a network provider or go out-of-network.

Health Maintenance Organization (HMO) members are limited to the HMO Louisiana Network for services and have no benefits for services provided by out-of-network providers without obtaining prior approval.

Provider Responsibilities

1. Collect only the copayment, coinsurance and/or deductible amount for covered services.
2. Obtain prior authorization for any services requiring authorization (see the flip side of this speed guide).
3. Accept the HMO Louisiana allowable charge plus the member's applicable deductible, coinsurance and/or copayment as payment in full for covered services.
4. To refer HMO Louisiana members to HMO Louisiana providers use our online provider directory at www.BCBSLA.com > Find a Doctor or Drug. Enter the member's prefix found on the member ID card or select the "HMO Louisiana HMO/POS" option.
5. File claims for all HMO Louisiana patients.

Services That Require Authorization Prior to Rendering Services

The following services may require HMO Louisiana approval. This list may vary for self-funded groups. Please always verify the member's eligibility, benefits and limitations prior to providing services. To do this, use iLinkBlue (www.BCBSLA.com/linkblue).

- Air Ambulance – Non-Emergency
- Applied Behavior Analysis
- Arterial Ultrasound*
- Arthroscopy and Open Procedures (Shoulder & Knee)*
- Bone Growth Stimulator
- Cardiac Rehabilitation
- Compound Drugs greater than \$250
- Coronary Arteriography*
- CT Scans*
- Day Rehabilitation Programs
- DME greater than \$300
- Electric & Custom Wheelchairs
- Genetic Testing
- Hip Arthroscopy*
- Home Health Care
- Hospice
- Hyperbarics
- Implantable Medical Devices over \$2,000 (including but not limited to defibrillators and insulin pumps)
- Infusion Therapy – includes home and facility administration (exception: physician's office, unless the drug to be infused may require authorization)
- Inpatient Hospital Services (except routine maternity stays)
- Intensive Outpatient Programs
- Interventional Spine Pain Management*
- Joint Replacement (Hip, Knee & Shoulder)*
- Low-protein Food Products
- Meniscal Allograft Transplantation of the Knee*
- MRI/MRA*
- Nuclear Cardiology*
- Oral Surgery (not required when performed in a Physician office)
- Orthotic Devices greater than \$300
- Partial Hospitalization Programs
- Percutaneous Coronary Interventions such as Coronary Stents and Balloon Angioplasty*
- PET Scans*
- Certain Prescription Drugs – the complete list of drugs requiring an authorization is available online at www.BCBSLA.com/providers > Pharmacy
- Private Duty Nursing
- Prosthetic Appliances
- Radiation Therapy for Oncology*
- Residential Treatment Centers
- Resting Transthoracic Echocardiography*
- Sleep Studies (except those performed as a home sleep study)
- Spine Surgery*
- Stress Echocardiography*
- Temporomandibular Joint Syndrome (TMJ) surgical treatment
- Transesophageal Echocardiography*
- Transplant Evaluations & Transplants
- Treatment of Osteochondral Defects*
- Vacuum Assisted Wound Closure Therapy

*Request for prior authorization for these services may be completed online through the AIM **ProviderPortal_{SM}** on iLinkBlue.

PCP Office Responsibilities

Provide 24-hour access to medical care for members via call coverage with another physician as well as answering service or pager access to the PCP. It is the PCP's responsibility to make arrangements with the covering physician to ensure that the covering physician accepts the HMO Louisiana allowable charge as payment in full for covered services.

Physician Services

Different copayment amounts apply to primary care physicians (PCPs), specialists, urgent care clinics and hospital stays.

The following HMO Louisiana network provider types should collect the PCP copayment:

- Physicians (*family or general practice, geriatric, internal medicine & pediatric*)
- Chiropractors
- Optometrists
- Retail Health Clinics
- Physician Assistants
- Nurse Practitioners

Office Copayments

Only one copayment should be collected per office visit.

An office copayment may apply to the following services when rendered in a provider's office or clinic:

- Office visit charges & consultations
- X-rays
- Laboratory tests
- Machine tests
- Injections, allergy serums, vials of allergy medications
- Radiation treatments
- Surgical procedures

The physician copayment does not cover allergy testing, prescription drugs, well-baby care, routine physical exams, high-tech imaging or medical/surgical supplies.

QBPC Copayment Incentive

HMO Louisiana waives or reduces members' office visit copayment when they receive office services from a primary care provider (PCP) participating in the Quality Blue Primary Care (QBPC) program as follows:

Product	PCP Office Copayment	Effective Date
HMO Louisiana products with office copayment services	Reduced by a maximum of \$15 (a \$5 minimum copay amount applies)	January 1, 2018
HMO Louisiana products without an office copayment	Not Applicable	No Change
Blue Cross and Blue Shield of Louisiana employee group policies (<i>ID cards with the group number 46210</i>)	Waived	July 15, 2014

Use iLinkBlue (www.BCBSLA.com/ilinkblue) to verify patient cost share amounts.

Maternity Admissions

Maternity admissions to in-network facilities (*or out-of-network facilities if the member has out-of-network benefits that could be reduced if services are at an out-of-network facility*) do not require authorization if the inpatient stay is 48 hours or less for vaginal delivery and 96 hours or less for caesarean section delivery for HMO Louisiana members with maternity benefits.

Utilization Management Programs

HMO Louisiana has several utilization management programs that require prior authorization for select elective services.

AIM Specialty Health® (AIM), an independent specialty benefits management company, serves as our authorization manager for these services:

- Cardiology
- High-tech Imaging
- Musculoskeletal (MSK)
 - Interventional Pain Management
 - Joint Surgery
 - Spine Surgery
- Radiation Oncology

Authorization requests may be completed online using the AIM **ProviderPortal**SM accessed through iLinkBlue. AIM clinical appropriateness guidelines are available at www.aimspecialtyhealth.com. Additional information can be found in the *Professional Provider Office Manual*.

Behavioral Health Claims & Authorizations

Claims should be submitted to Blue Cross and Blue Shield of Louisiana for processing. For behavioral health services requiring an authorization, Blue Cross has partnered with New Directions to manage the authorization process. Request authorization using the Behavioral Health Authorizations tool, available under the "Authorizations" section of iLinkBlue, or call New Directions at 1-800-991-5638.

Additional information on authorizations, claims and member benefits can be found in the *Behavioral Health Speed Guide*, available at www.BCBSLA.com/providers > Resources.

Submitting claims

Electronically:

- iLinkBlue (CMS-1500 only)
- Clearinghouses

Hardcopy:

HMO Louisiana
P.O. Box 98029
Baton Rouge, LA 70898-9029

Provider Resources

Always have your NPI or HMO Louisiana provider number available when calling.

Customer Care Center

1-800-922-8866

Network Administration

1-800-716-2299

- Option 1 - Network Development network.development@bcbsla.com
- Option 2 - Provider Credentialing
- Option 3 - Data Management
- Option 4 - Provider Relations provider.relations@bcbsla.com
- Option 5 - Provider Identity Management PIMTeam@bcbsla.com

iLinkBlue, Electronic Claims & Clearinghouse

1-800-216-BLUE (1-800-216-2583) or EDIServices@bcbsla.com

Fraud & Abuse Hotline

1-800-392-9249

Call 24/7. You can remain anonymous. All reports are confidential.

Member Benefits

Call number on the member ID card.

Case & Disease Management

1-800-317-2299

AIM Specialty Health (AIM)

1-866-455-8416

New Directions

1-800-991-5638